

AMENDMENT TRANSMITTAL LETTER (Large Entity)Applicant(s): **Anthony AQUILA, et al.**

Docket No.

13CN-126552

Application No.

09/825,604

Filing Date

April 3, 2001

Examiner

Christopher L. GILLIGAN

Customer No.

30764

Group Art Unit

3626

Confirmation No.

3275Invention: **SYSTEM AND METHOD OF ADMINISTERING TRACKING AND MANAGING OF CLAIMS PROCESSING**COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	19 -	20 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00

☒ No additional fee is required for amendment.☐ Please charge Deposit Account No. _____ in the amount of _____☐ A check in the amount of _____ to cover the filing fee is enclosed.☐ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account☐ Any additional filing fees required under 37 C.F.R. 1.16.☐ Any patent application processing fees under 37 CFR 1.17.☐ Payment by credit card. Form PTO-2038.**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**Dated: **July 18, 2007**

Young A. Tang

Reg. No.: 55,665

SHEPPARD MULLIN RICHTER & HAMPTON LLP**333 South Hope Street, 48th Floor****Los Angeles, CA 90071-1448****Telephone: (858) 720-8900****Facsimile: (858) 509-3691***Signature*

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____.

(Date)

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